1								·		29	MAR	
	PATE	ENT APPLIC		December	8, 20		EC	ORD	Ap	plication	on or Docket	Number
		CLAIMS	AS FILE	D - PART	I Naci	tonel Stage Proc alagai Specialist		SMALL EN	TITY		Almoton Alvase	do
_	·			olumn 1)		30-006-0421	•	TYPE			703 355-342	EFFITY 1
U.S. NATIONAL STAGE FEES								RATE	FEE	7	RATE	FEE
B/	SIC FEE		SMALL	ENT. = \$ 150	LAF	GE ENT. = \$ 300		BASIC FEE		OF	BASIC FEE	200
EXAMINATION FEE				Satisfies PCT Article 33(1)- (4) = \$50 / \$100		All other situations = \$ 100 / \$ 200		EXAM. FEE	M. FEE	1	EXAM. FEE	200
SEARCH FEE			ALL other	U.S. is ISA = \$50 / \$ 100 ALL other countries = \$ 200 / \$ 400		other situations = \$ 250 / \$ 500		SEARCH FEE	: '		SEARCH FEE	M
EE FOR EXTRA SPEC. PGS.				minus 100 =		/ 50 =		X \$ 125 = 1	·	1	X \$ 250 =	1.70
OTAL CHARGEABLE CLAIMS			10	/ minus 20 = .				X \$ 25 =		OR	 	
√E	EPENDENT C	CLAIMS	1	minus 3 =	•			X \$ 100 =	 	OR		
U	LTIPLE DEPE	NDENT CLAIM P	RESENT				ŀ	+ \$ 180 =		-		ļ
-		ce in column 1 is		rero enter *0	" in c	olumn 2	l	TOTAL		OR OR	+ \$ 360 =	000
-		CLAIMS AS (Column 1) CLAIMS REMAINING AFTER AMENDMENT	Amend	(Colum HIGHE NUMB PREVIOI PAID F	nn 2) ST ER USLY	(Column 3) PRESENT EXTRA		SMALL E	ADDI- TIONAL FEE	OR	OTHER SMALL E RATE	ADDI- TIONA
	Total						ŀ			j		FEE
	Total	<u> </u>	Minus	**		=	l	X \$ 25 =		OR	X \$ 50 =	FEE
	Independent	•	Minus Minus	***		=		X \$ 25 = X \$ 100 =		OR OR	X \$ 50 = X \$ 200 =	FEE
	Independent	SENTATION OF A	Minus	***	LAIM	- -						FEE
	Independent	SENTATION OF I	Minus	***	LAIM	- - 		X \$ 100 =		OR	X \$ 200 = + \$ 360 = TOTAL ADDIT.	FEE
	Independent	(Column 1) CLAIMS REMAINING	Minus	(Column HIGHE:	n 2) ST	(Column 3)		X \$ 100 = + \$ 180 =	ADDI- TIONAL	OR OR	X \$ 200 = + \$ 360 = TOTAL ADDIT. FEE	ADDI-
	Independent FIRST PRES	(Column 1)	Minus	EPENDENT C	n 2) ST ER	(Column 3)		X \$ 100 = + \$ 180 = TOTAL ADDIT. FEE	- ADDI- TIONAL FEE	OR OR	X \$ 200 = + \$ 360 = TOTAL ADDIT.	
	Independent	(Column 1) CLAIMS REMAINING AFTER AMENDMENT	Minus	(Columnia HIGHE:	n 2) ST ER	(Column 3)		X \$ 100 = + \$ 180 = TOTAL ADDIT. FEE	TIONAL	OR OR	X \$ 200 = + \$ 360 = TOTAL ADDIT. FEE	ADDI- TIONAL
	Independent FIRST PRES	(Column 1) CLAIMS REMAINING AFTER AMENDMENT	Minus AULTIPLE DI	(Columnia Higher NUMBE PREVIOU PAID FO	n 2) ST ER	(Column 3)		X \$ 100 = + \$ 180 = TOTAL ADDIT. FEE	TIONAL	OR OR OR	X \$ 200 = + \$ 360 = TOTAL ADDIT. FEE	ADDI- TIONAL
	Independent FIRST PRES Total Independent	(Column 1) CLAIMS REMAINING AFTER AMENDMENT	Minus Minus Minus Minus	(Column HIGHE: NUMBE PREVIOU PAID FO	n 2) ST ER ISLY DR	(Column 3)		X \$ 100 = + \$ 180 = TOTAL ADDIT. FEE RATE	TIONAL	OR OR OR	X \$ 200 = + \$ 360 = TOTAL ADDIT. FEE RATE X \$ 50 =	ADDI- TIONAL